		•	r Ev
	, , ,		*
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		> =
	1		> 7
		7	1
			?
		7	
			•
п			

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 177-0014												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LL E	NTITY	OR	OTHER SMALL	THAN
TOTAL CLAIMS)7				RA	TE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS / 7 minus 2				us 20=	· 05		X\$	9=		OR	X\$18=	-()-
INDEPENDENT CLAIMS 3 =				· (1)		X4	0=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT											.070	
* If the difference in column 1 is less than zero, enter "0" in column 2								35=	200	OR	+270=	
CLAIMS AS AMENDED - PART II									3 S Y	OR	TOTAL	THAN
	C	(Column 1)	INICIANCI	Colur		(Column 3)	SM	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
NT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO N	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=	X4	0=		OR	X80=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		+15	35=		OR	+270=	
•							<u> </u>	OTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT	. FEE			ADDIT. FEE	100
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	**		=	X\$	9=		OR	X\$18=	5
AMEND	Independent	*	Minus	***		=	X4	0=		OR	X80=	%.
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		+10	35=		OR	+270=	
							T ADDI1	OTAL FEE		OR	TOTAL ADDIT. FEE	×
	· .	(Column 1)		(Colu	mn 2)	(Column 3)					-1.	e i sji
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total -	• 1 4 4	Minus	** .		=	X\$	9=	1. 18 M. 18	OR	X\$18=	Marina
ME	Independent	•	Minus	***		=	X4	0=	. (OR	X80=	
V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]		1 1	A A	+270=		
* If the entry in column 1 is less than the intry in column 2 write "0" in column 3.										138 m		
**	** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, nter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "High st Nur	nbér Pr vi usly Pa	id For" (Total o	r Independ	d nt) is th	highest numb	er found in	the ap	propriate bo	x in co	olumn 1.	

Application or Docket Number